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CONFIRMATION NO. 1808

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|---|---|--|---|---|-------------------------------|------------------------------------|
| SERIAL NUMBER 10/580,190 | FILING or 371(c) DATE 05/23/2006 RULE | CLASS 514 | GROUP ART UNIT 1655 | ATTORNEY DOCKET NO. 2503-1215 | | |
| APPLICANTS Ezio Bombardelli, Gropello Cairoli, ITALY; ** CONTINUING DATA ***** This application is a 371 of PCT/EP04/12472 11/04/2004 ** FOREIGN APPLICATIONS ***** ITALY MI2003A 002287 11/24/2003 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/29/2007 | | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/QIUWEN MI/</u> Examiner's Signature | | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY ITALY | SHEETS DRAWINGS 0 | TOTAL CLAIMS 15 | INDEPENDENT CLAIMS 2 |
| ADDRESS YOUNG & THOMPSON 209 Madison Street Suite 500 ALEXANDRIA, VA 22314 UNITED STATES | | | | | | |
| TITLE Compositions for the treatment of affections of the oral cavity and upper respiratory tract | | | | | | |
| FILING FEE RECEIVED 900 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | | |